

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE						DDS/OTR/EA - 6	
1. TITLE OF REPORT (If a fill-in report include Form No.) Forecast of <input type="text"/>						2. TYPE OF REPORT	<input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING
3. FUNCTIONAL AREA	<input type="checkbox"/>	PERSONNEL	<input type="checkbox"/>	TRAINING	ADMIN. GENERAL OTHER (specify)		
	<input checked="" type="checkbox"/>	LOGISTICS	<input type="checkbox"/>	SECURITY			
	<input type="checkbox"/>	MEDICAL	<input type="checkbox"/>	FINANCE			
4. NO. OF COPIES PREPARED 4	5. FREQUENCY (weekly, monthly, quarterly, etc.) Semi-annual				6. DISTRIBUTION (No. of components not number of copies) 4		
7. FORMAT (memorandum, form, computer print-out, etc) Form	8. ADP PROCESSING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.				9. DIRECTIVE AUTHORITY REQUIRING REPORT Actual need		
10. PREPARING COMPONENT (include lowest level contributing information to report) EA/MS				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) 7 (Average) (Varies, depending upon school need <input type="text"/> )			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR
GS-14	11.00		1		11.00		2 \$22.00
GS-07	4.50		1/2		2.25		2 4.50
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$26.50	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.  Need to collate all special requests <input type="text"/> in order to anticipate workload for STAT <input type="text"/> already assigned to <input type="text"/>							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS MAN-HOURS DOLLARS 0 0 STAT	
16. DATE OF INVENTORY 8 October 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION C/EA/MS					18. EXTENSION <input type="text"/>